

USAID GH/HIDN CHILD SURVIVAL AND HEALTH GRANTS PROGRAM



FY 2003 RFA CONFERENCE

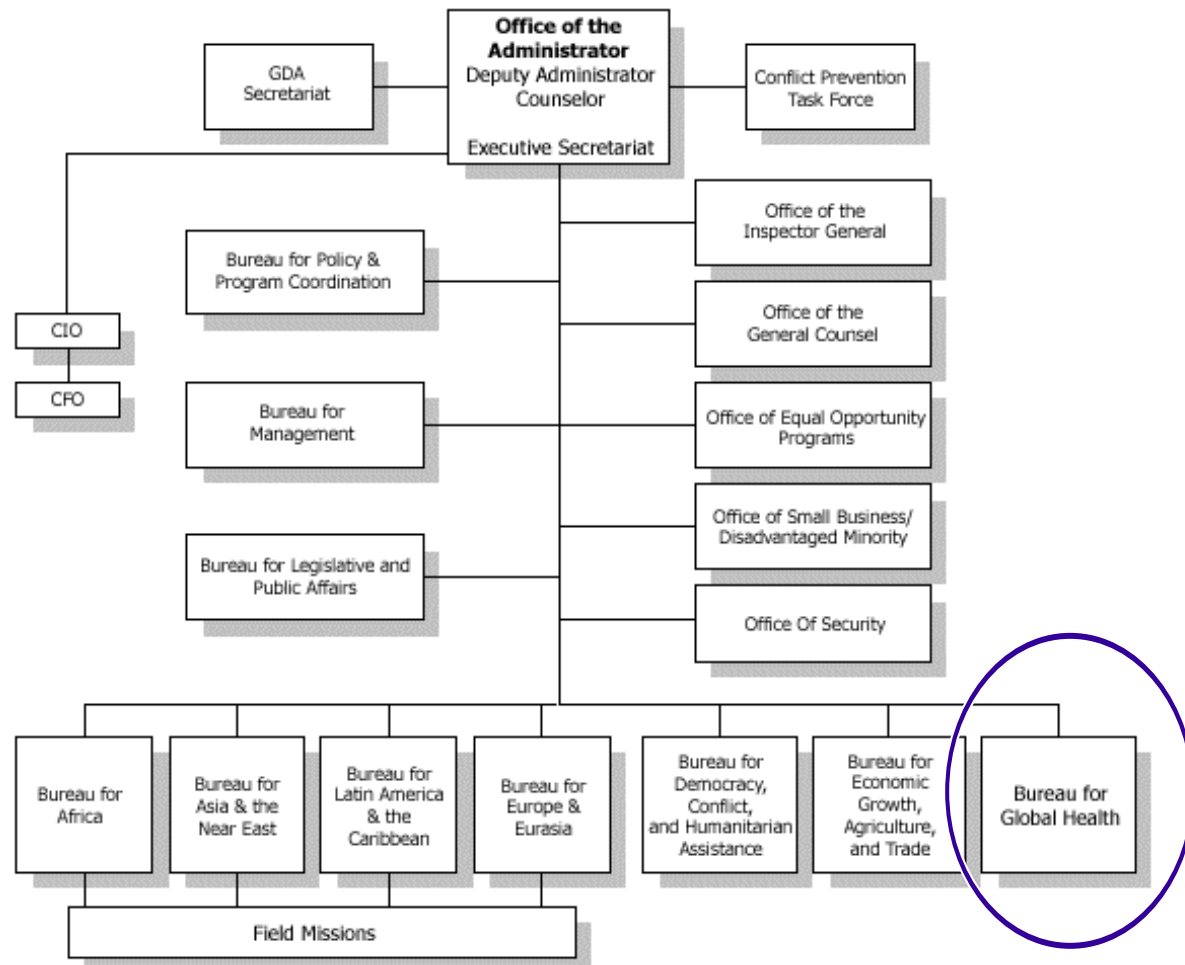
September 13, 2002 Silver Spring, MD

United States Agency for International Development

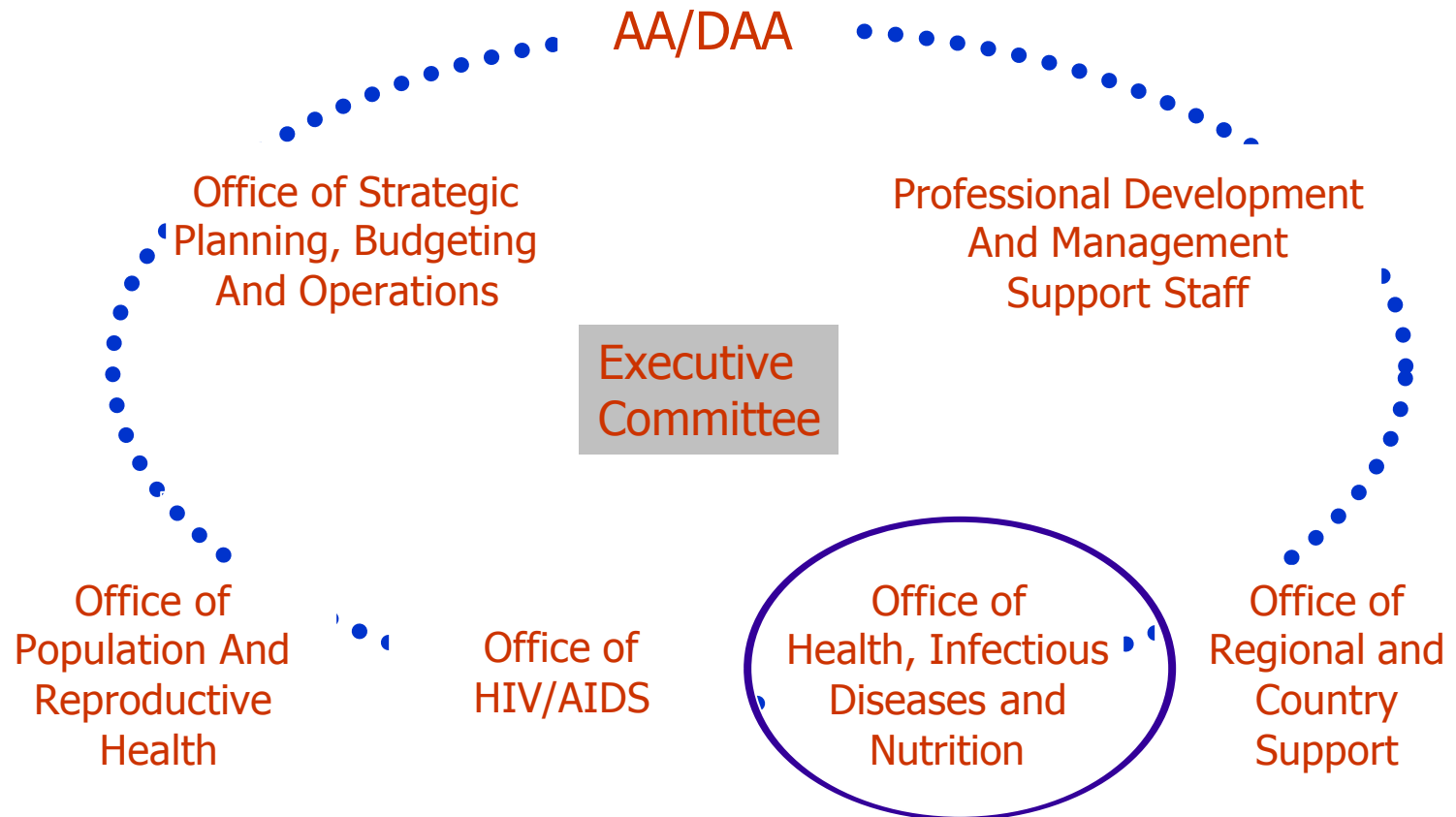


**New Bureau for Global Health
Presentation: FY 2003 CSHGP RFA Conference
Betsy Brown, Director
Office of Health, Infectious Diseases and Nutrition
September 13, 2002**

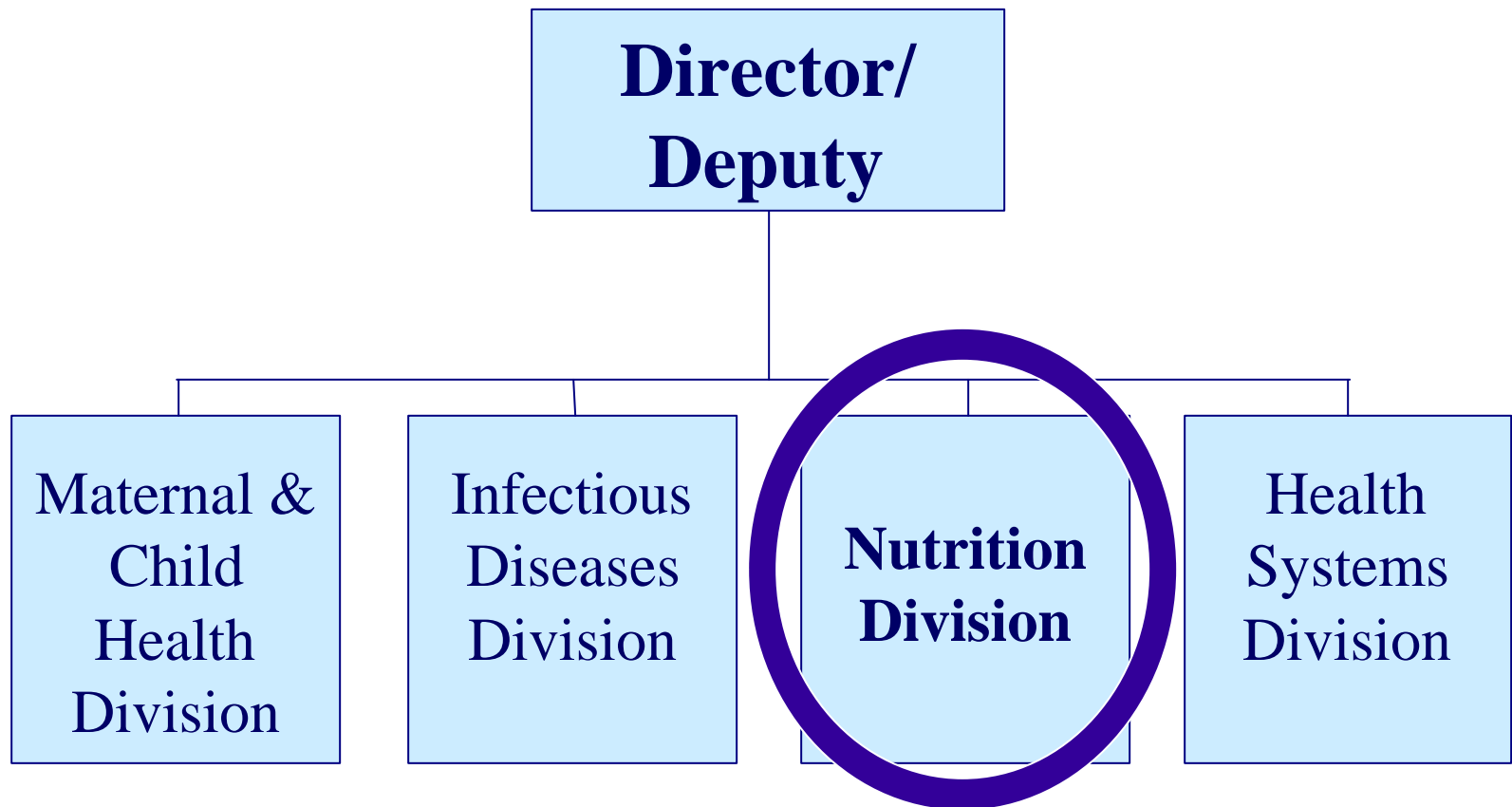
USAID Organizational Structure



GH Organizational Structure



Office of Health, Infectious Diseases & Nutrition



PVOs are Key Partners for GH

- GH's PVO programs include:
 - CSHGP
 - new RH/FP initiative
 - PVOs as partners on our TA programs
 - Comprehensive HIV/AIDS PVO programs

PVO Programs are Critical to Achieving GH's Objectives

- by focusing on delivering quality services, especially proven, cost effective interventions
- by expanding their geographic scope and coverage
- by having policy and programmatic impact on local organizations and governments
- by forging strong links with Mission programs

-Cont.

- by integrating services at the community level (including FP and HIV/AIDS)
- testing innovative strategies and conducting operations research
- by closely collaborating with the new global health alliances (GAVI, GFATM, RBM)

Forward to the Fundamentals:

Ensure that proven interventions and approaches are covered in MCH/FP:

- ➡ For CS: still large unmet needs for immun, vita suppl, exclusive breastfeeding, etc.
- ➡ For MH: Iron supplementation, prevention and control of postpartum hemorrhage, etc.
- ➡ For FP/RH: accessible services, range and availability of methods, etc.

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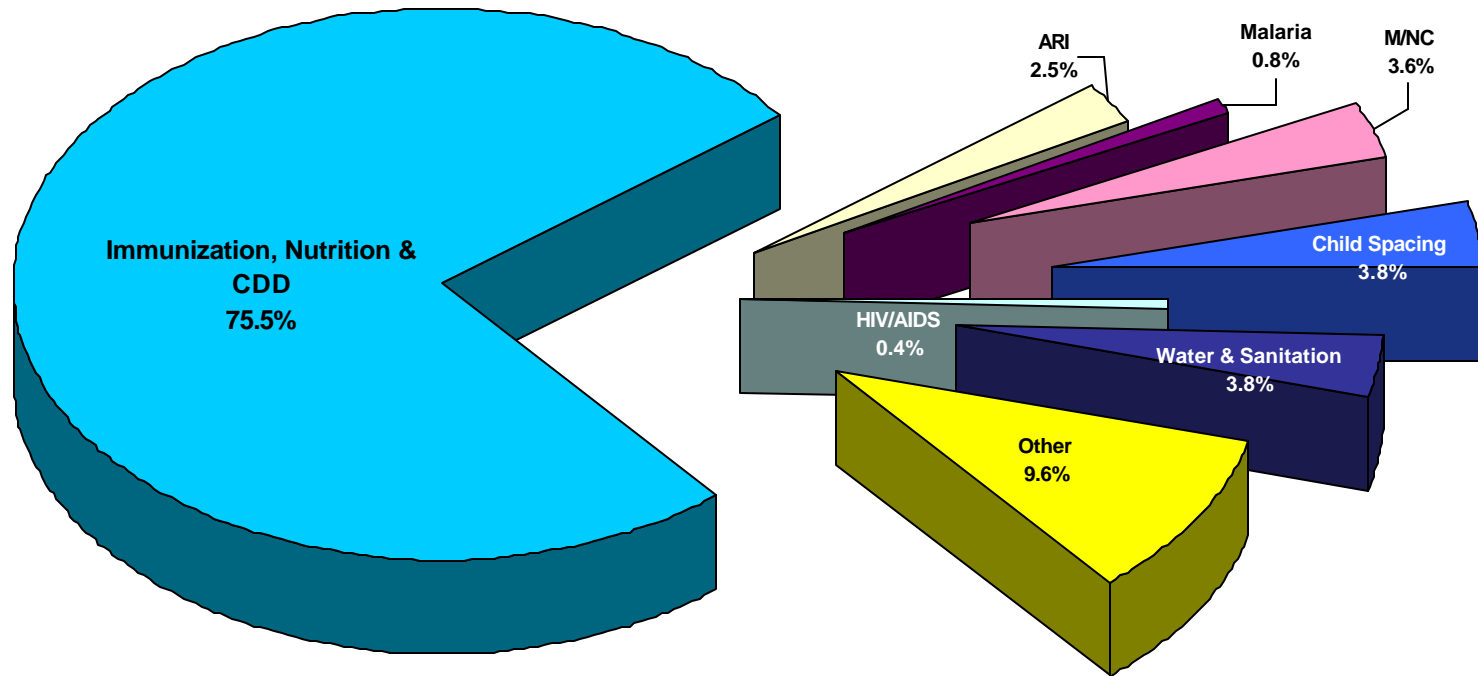
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CSHGP Background

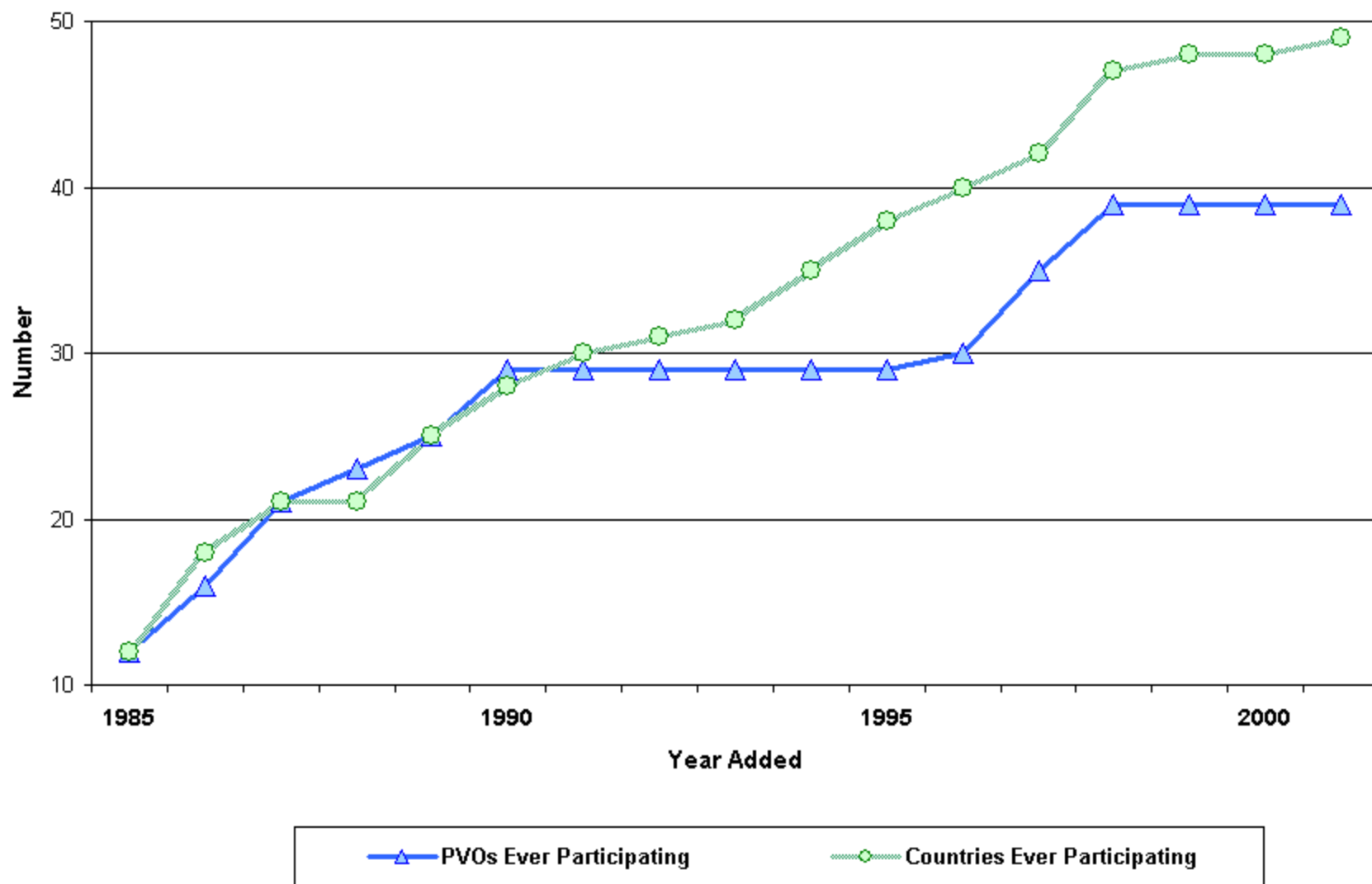
- 1985 in PVC/DCHA (formerly BHR)
- Purpose: To improve the capacity of US-based PVOs and their local partners to carry out effective, sustainable child survival programs
- 27 Programs with 12 PVOs in 12 Countries
- Limited interventions/ service delivery

CSGP Cycle I Projects

Composite Intervention Mix (1985)



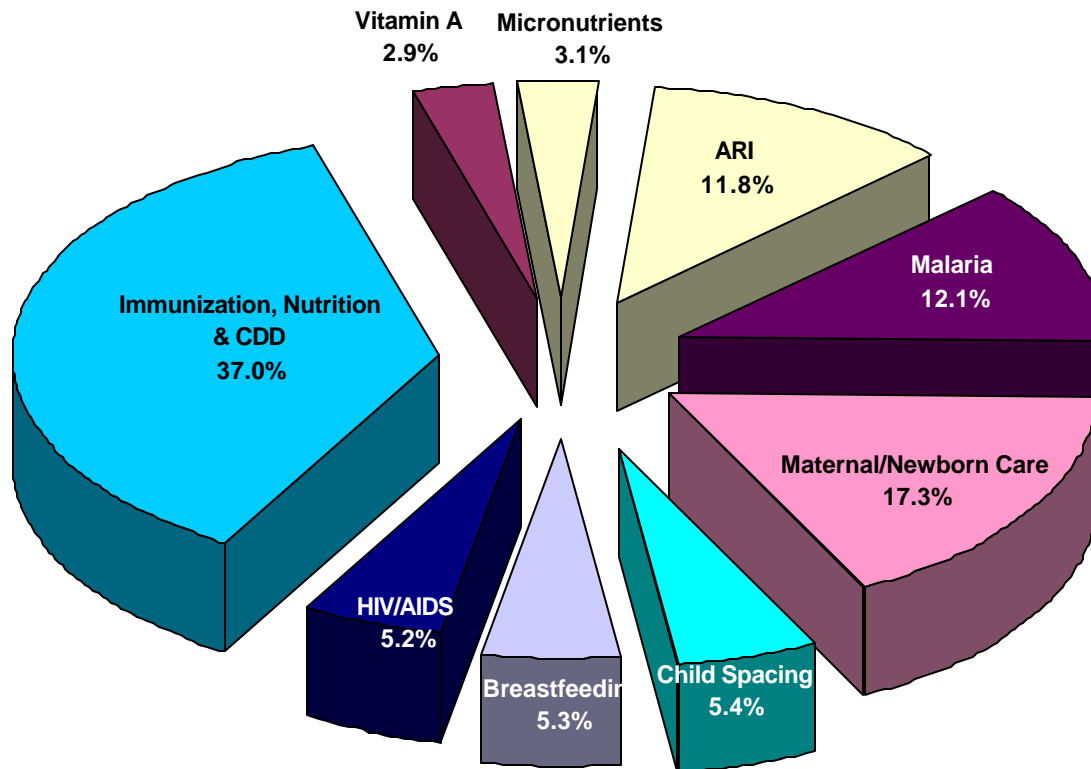
CSGP Program Growth (1985-2001)



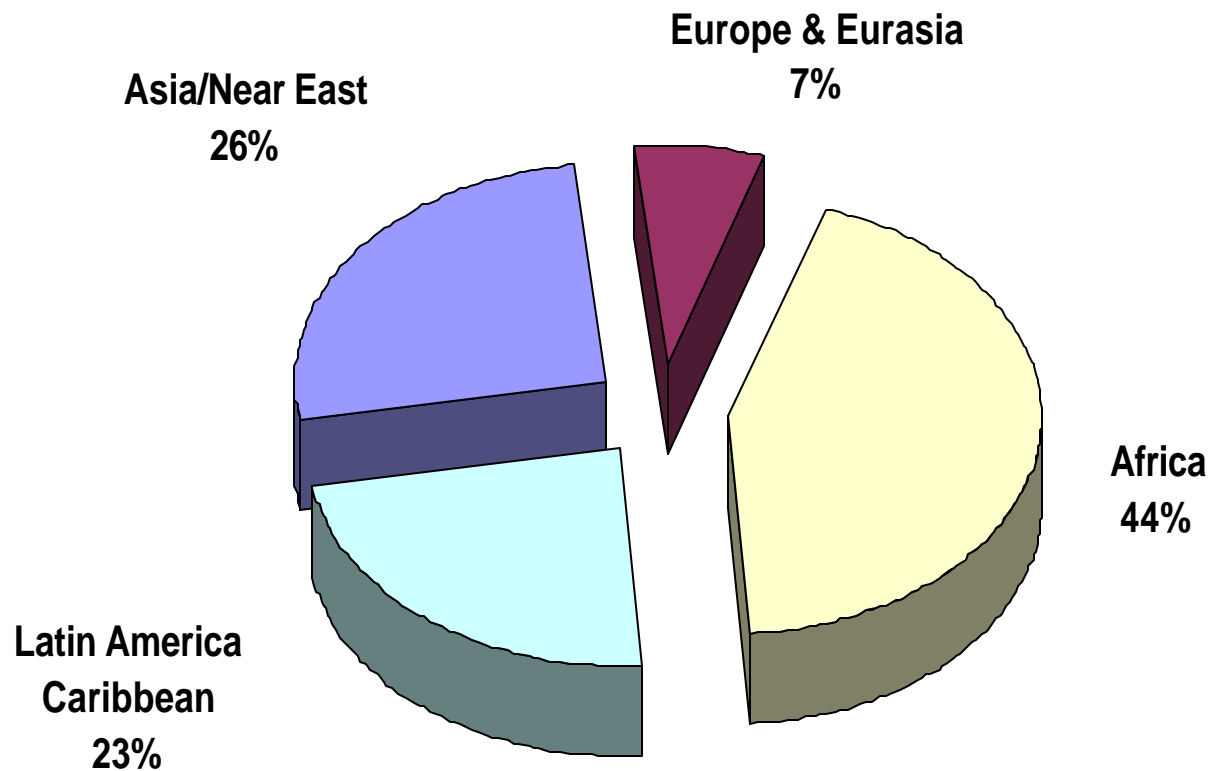
CSGHP Background (cont'd)

- 2002 - Current portfolio of 84 funded projects in 36 countries working with 26 PVOs
- Shifts: Increased interventions
Cross-cutting strategies
Results/impact through local partners

**CSGP Current Project
Composite Intervention Mix
July, 2002 (N=73)**



Distribution of Child Survival Grants Program Activities by Region, FY 2002



CSHGP Partners

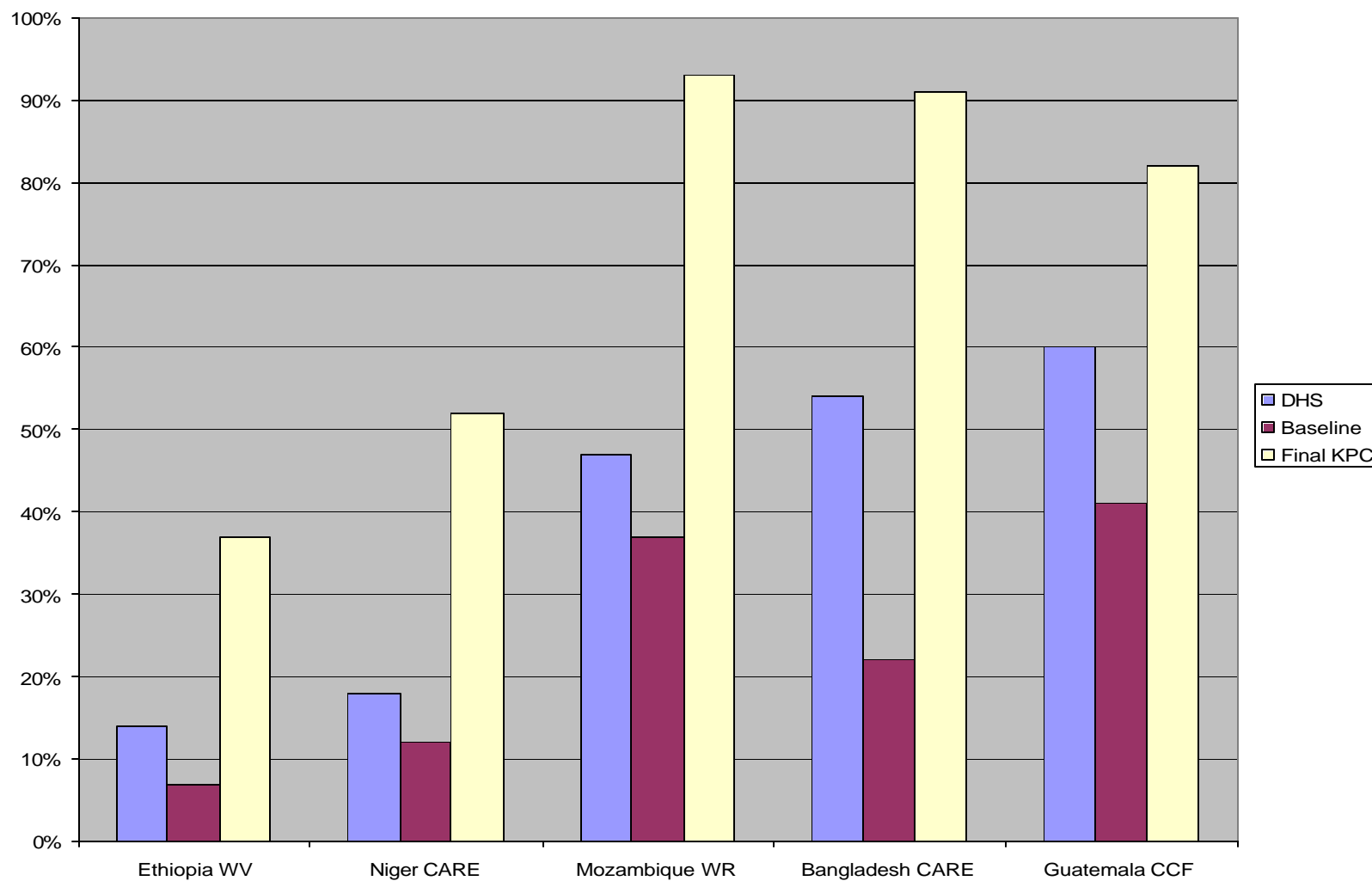
- * CORE and its 7 Working Groups
- * Child Survival Technical Support Contract (CSTS) Project
- * GH's Cooperating Agencies
- * USAID Missions

Developments

- 350 CS Programs with 30 million beneficiaries (C>5 and WRA) reached
- CS Interventions (i.e., Immunization Coverage, Hearth/Positive Deviance, Roll Back Malaria)
- Sustainability (sustainability framework and planning)

Developments(cont'd)

- Household and Community - IMCI (Integrated Management of Childhood Illness)
- Monitoring & Evaluation (baseline assessments including KPC 2000+ Survey & Rapid Catch indicators, LQAS, ISA, etc.)



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What's New This Year

- Revised Objective
- Three new “results”
- Expanded Impact Category
- New Technical Areas - FP and TB
- Cost-extension guidance provided
- Increased collaboration with USAID Missions
- Organizational/eligibility requirements
- Sustainability
- Evaluation Criteria

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What's new this year, cont.

➤ USAID field mission involvement